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UNITED STATES
ECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OCT 2 6 2005

FORM D

PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC

OMB APPROVAL

OMB Number: 3235-0076 Expires: March 30, 2008 Estimated average burden hours per form......1



Name of Offering (check if this is an a	mendment and name has chan	ged, a	nd indicate change.)				
Series A Preferred Stock and underlying s	hares of Common Stock						
Filing Under (Check box(es) that apply):	☐ Rule 504		☐ Rule 505	⊠ Rule 506		☐ Section 4(6)	ULOE
Type of Filing:		X	New Filing			Amendment	
	A. BAS	SIC II	DENTIFICATION DA	TA	-		
1. Enter the information requested about	it the issuer						
Name of Issuer (check if this is an am	endment and name has change	d, and	indicate change.)				
World of Good Holding Company, Inc.							
Address of Executive Offices	(Number and S	street,	City, State, Zip Code)	Telephone Nur	nber (1	ncluding Area Co	ode)
1380 10th Street, Berkeley, CA 94710				(510) 528-840	0		
Address of Principal Business Operations	(Number and Street, City, Sta	te, Zip	Code)	Telephone Nur	nber (l	ncluding Area Co	ode)
(if different from Executive Offices)							PROCESSED
Brief Description of Business							
Retail sales of handcrafted products							40CT 2 8 2005
Type of Business Organization						47	70012020
□ corporation	☐ limited partnership, alrea	dy for	med			other (please spec	cify):THOMSON
□ business trust	☐ limited partnership, to be	form	ed				FINANCIAL
				<u>ear</u>			
Actual or Estimated Date of Incorporation	or Organization:	•	June 2	2005	(C)	Actual	☐ Estimated
Jurisdiction of Incorporation or Organizat	ion: (Enter two-letter U.S.	Postal	Service abbreviation for	or State:	لکا	Actual	LI ESUITACU
tunisation of mesoporation of Organizati	CN for Canada; FN fo						DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last Haji, Priya	name first, if individual)				
Business or Res	idence Address (Number and od Holding Company, Inc., 13	Street, City, State, Zip Code) 80 10 th Street, Berkeley, CA 94	4710		
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☑ Executive Officer	⊠ Director	General and/or Managing Partner
	name first, if individual)			 	
	idence Address (Number and S	Street, City, State, Zip Code) 80 10 th Street, Berkeley, CA 9 ⁴	1710		
Check Boxes that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last Guendelman, D	name first, if individual)				
	idence Address (Number and South Holding Company, Inc., 13	Street, City, State, Zip Code) 80 10 th Street, Berkeley, CA 9 ⁴	4710		
Check Boxes that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Draper Fisher Ju					
	idence Address (Number and S Road, Menlo Park, CA 94025	Street, City, State, Zip Code)			
Check Boxes that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Higgerson Revo	name first, if individual) cable Trust DTD 4/6/90				
c/o Higgerson Ir	idence Address (Number and Sovestments, 305 Lytton Ave., F				
Check Boxes that Apply:	☐ Promoter	☑Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Omidyar Netwo					
	idence Address (Number and S , Ste. 200, Redwood City, CA				
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
	name first, if individual)				
Business or Res	idence Address (Number and S	Street, City, State, Zip Code)			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			MI,

				В	. INFORM	ATION AB	OUI OFFE	RING				
1. Has	s the issuer sold, or	does the issu	er intend to					?g under ULOF			Yes N	o <u>X</u>
2. Wh	at is the minimum	investment th	nat will be a	ecepted fror	n any indivi	dual?					\$	0
3. Do	es the offering perr	mit joint own	ership of a si	ngle unit?						•••••	Yes <u>X</u> N	0
soli reg	ter the information icitation of purchal istered with the SE ker or dealer, you	sers in conne C and/or wit	ection with s h a state or s	sales of sec tates, list th	curities in the name of t	ne offering. he broker or	If a person	to be listed	is an associat	ed person or	agent of a	broker or dealer
Full Nar	me (Last name first	, if individua)				<u> </u>					
Rusines	s or Residence Ado	Iress (Numbe	r and Street	City State	Zin Code)							
Dusines.	of Residence / Ide	iress (i vallise	and Sacce,	on, sun,	Zip code)							
Name of	f Associated Broke	r or Dealer										
States in	Which Person Lis	ted Has Solic	ited or Inten	ds to Solici	t Purchasers							, .,
(Check '	"All States" or che	ck individual	States)						***************************************			All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full Nar	ne (Last name first	, if individua	1)									
Business	s or Residence Add	lress (Numbe	r and Street,	City, State,	Zip Code)							
Name of	f Associated Broke	r or Dealer				<u> </u>	1					
States in	Which Person Lis	ted Has Solic	ited or Inten	ds to Solici	t Purchasers	3						
(Check	"All States" or che	ck individual	States)									All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full Nar	ne (Last name first	, if individua	1)									
Busines	s or Residence Ado	dress (Numbe	r and Street,	City, State,	Zip Code)							
Name of	f Associated Broke	r or Dealer										4400
Ctut	1171 1 D 21	4. 177. 0 **		1	- D - 1							
	Which Person Lis					3						□ A11 C4-4:
	"All States" or che							mo:	(FT)			All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	(FL)	[GA]	[HI]	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the	sold sec	. Enter "0" if a	nswer is ' r exchangi	"none e and	" or "zero." If the already exchanged
	Type of Security		Aggregate Offering Price	• •/••••		nount Already Sold
	Debt	\$			\$	
	Equity		1,392,492			1,392,492
	Common X Preferred	Ψ_				
		e			æ	
	Convertible Securities (including warrants)	_				
	Partnership Interests					
	Other (Specify)		1 202 402		ъ	1,392,492
	Total	2 _	1,392,492		3	1,392,492
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."					
			Number			Aggregate
	•		Investors			ollar Amount of Purchases
	Accredited Investors		24		\$	1,392,492
	Non-accredited Investors		0			0
	Total (for filings under Rule 504 only)					
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		Type of		D	ollar Amount
			Security			Sold
	Type of Offering					
	Rule 505	_			\$	
	Regulation A	_			\$	
	Rule 504	_			\$	
	Total	_			\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees				\$	
	Printing and Engraving Costs				\$	
	Legal Fees			×		28,000
	Accounting Fees				\$	
	Engineering Fees				\$_	
	Sales Commissions (specify finders' fees separately)				\$_	
	Other Expenses (Identify)		•		\$_	
	Total			×	\$	1,364,492

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE OF PROCEEDS	
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 an in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer"	d total expenses furnished	<u>\$1,364,492</u>
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for ea If the amount for any purpose is not known, furnish an estimate and check the box to the left of the expayments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Quest	estimate. The total of the tion 4.b above.	
	Payment to Officers, Directors, & Affiliates	Payment To Others
Salaries and fees	□ s	□ s
Purchase of real estate	□ s	
Purchase, rental or leasing and installation of machinery and equipment	□ \$	
Construction or leasing of plant buildings and facilities	\$	
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	□ \$	
Repayment of indebtedness	□ s	
Working capital	S	
Other (specify):	□ s	□ s
Column Totals.		□ s
Total Payments Listed (column totals added)		1,364,492
D. FEDERAL SIGNATURE		
The issuer had duly caused this notice to be signed by the undersigned duly authorized person. If this notice is an undertaking by the issuer to furnish to the U.S. Securities and Exchange commission, upon written request non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	s filed under Rule 505, the t of its staff, the information	following signature constitutes n furnished by the issuer to any
Issuer (Print or Type))	Date
World of Good Holding Company, Inc.	/ 	
Name of Signer (Print or Type) Title of Signer (Print or Type) Provident		
Priya Haji President	X	·
	• •	
ATTENTION		
Intentional misstatements or omissions of fact constitute federal criminal violations. (See	18 U.S.C. 1001.)	

_	E. STATE SIGNATURE							
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No					
	See Appendix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to furnish to the state administrator of any state in which the notice is filed, a notice on Form I such times as required by state law.) (17 CFR 2	39.500) at					
3.	The undersigned issuer hereby undertakes to furnish to any state administrators, upon written request, information furnished by the issuer to describe the undersigned issuer hereby undertakes to furnish to any state administrators, upon written request, information furnished by the issuer to describe the undertakes to furnish to any state administrators, upon written request, information furnished by the issuer to describe the undertakes to furnish to any state administrators, upon written request, information furnished by the issuer to describe the undertakes to furnish to any state administrators, upon written request, information furnished by the issuer to describe the undertakes to furnish to any state administrators.	fferees.						
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.							
The	e issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the under son.	signed duly	authorized					
Issu	uer (Print or Type)	Date						
Wo	orld of Good Holding Company, Inc.							
Naı	me (Print or Type) Title (Print or Type)							
Priy	ya Haji President							

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

			.,	APPENDIX					
1		2	3	· · ·	4				5
	to non- investo	nd to sell accredited ors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Accredited Non-			Yes	No
AL									
AK									
AZ									
AR									
CA		Х	Series A Preferred Stock	22	\$1,352,492	0	0		X
СО									
СТ									
DE									
DC									
FL									
GA									
HI									
1D					!				
IL									
IN									
ΙA									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS									
МО									

			: Shena	APPENDIX					
1		2	3		4				5
	to non- investo	nd to sell accredited rs in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E- Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT									
NE		<u> </u>							
NV					-				
NH									
NJ									
NM									
NY							f		
NC									
ND	<u> </u>					-	<u> </u>		
ОН									
OK									
OR						-			
PA						-			
RI									
SC									
SD									
TN									
TX		X	Series A Preferred Stock	l	\$25,000	0	0		X
UT			Stock						
VT					 		 		
VA									
WA					-				
WV									
WI					 				
WY					 	 	-		
PR									
FOREIGN		X	Series A Preferred	1	\$15,000	0	0		X